

**APPLICATION - CC903 EXCAVATION / OCCUPANCY PERMIT**  
**CITY OF COLUMBUS - DEPARTMENT OF PUBLIC SERVICE - DIVISION OF PLANNING & OPERATIONS**

TODAY'S DATE: \_\_\_\_\_

PERMIT OFFICE: (614) 645-7497

**SUBMIT APPLICATION TO:**  
PERMIT FAX: (614) 645-1876  
OR FAX (614) 645-6938

OCCUPANCY	EXCAVATION
STREET	STREET
R.O.W.	R.O.W.
SIDEWALK	SIDEWALK

STREET/ALLEY \_\_\_\_\_  
EXCAVATION SIZE: W \_\_\_\_\_ L \_\_\_\_\_ D \_\_\_\_\_  
**CONTACT PERMIT OFFICE WITH EXCAVATING START DATE**

APPLICANT: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ 24 HR. TELEPHONE NO: \_\_\_\_\_

LOCATION OF EVENT / WORK PROPOSED: \_\_\_\_\_

START DATE:	NUMBER OF DAYS NEEDED:	REQUESTED WORK HOURS:	TO

REASON FOR PERMIT: \_\_\_\_\_

VEHICLE(S) LICENSE NUMBER: \_\_\_\_\_

NUMBER OF PERMITS NEEDED: \_\_\_\_\_ **MUST HAVE ORIGINAL PERMIT ON DASH OF EACH VEHICLE AT METERS**

**NEED EXACT NUMBER(S) ON METER POST**  
PARKING METERS NUMBERS TO BE RESERVED: \_\_\_\_\_

DUMPSTER / CONTAINER OWNER NAME:	CONTAINER OWNER TELEPHONE NO.:

**MUST HAVE REFLECTOR TYPE TAPE ON CONTAINER/DUMPSTER/PODS OR LIGHTED BARRICADED IF PLACED IN STREET**



FOR OFFICE USE ONLY

**PLEASE READ NOTES:**

APPLICATION / REISSUE FEE IS NON REFUNDABLE  
*PARKING METERS TO BE HOODED, MUST BE PAID 48 HRS. PRIOR TO START DATE*  
MUST NOTIFY O.U.P.S. PRIOR TO EXCAVATING  
IF TREE / TREE ROOTS PRESENT, MUST NOTIFY CITY FORESTRY AT (614) 645-6640  
*LANE / STREET CLOSURES MUST NOTIFY TRAFFIC COORDINATORS AT (614) 645-6269 OR 645-5845*

APPLICATION PERMIT FEE	\$
REISSUE FEE	\$
PARKING METER FEE	\$
CONTAINER FEE	\$
STREET USE FEE	\$
INSPECTION FEE	\$
EXCAVATION DEPOSIT	\$
PAVEMENT REPAIR DEPOSIT	\$
TOTAL PERMIT AMOUNT DUE	\$

**TRAFFIC CONTROL MUST BE "SET UP" PRIOR TO WORKING IN STREET - SPECIAL DUTY OFFICER(S) REQUIRED WHEN MAINTAINING 2 WAY / 1 LANE TRAFFIC PATTERNS OR AT SIGNALIZED INTERSECTIONS (614) 645-4795**



**ALLOW 1 TO 3 BUSINESS DAYS FOR PROCESSING PERMITS**

